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CONFIRMATION NO. 6413

<b>SERIAL NUMBER</b> 10/633,486	<b>FILING OR 371(c) DATE</b> 07/31/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1609	<b>ATTORNEY DOCKET NO.</b> 67789-354
<b>APPLICANTS</b> Daniel Afar, Fremont, CA; David Agus, Beverly Hills, CA; David H. Mack, Menlo Park, CA;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/400,311 07/31/2002 <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 12/15/2003</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Allowance Acknowledged <u>David H. Mack</u> <u>David H. Mack</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 25
				<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 50670				
<b>TITLE</b> Diagnosis of ZD1839 resistant tumors				
<b>FILING FEE RECEIVED</b> 1138	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	